

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: Richard Kirkland
California Dept. of Corrections & Rehabilitation
Board of Parole Hearings
P.O. Box 4036
Sacramento, CA 95812-4036

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones, et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) - R. Jason Smith

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave.
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
[Signature]
Signature

Attorney in fact
Relationship to Entity/Authority to Receive
5/19/08
Service of Process
5/19/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
 United States Marshals Service

PROCESS RECEIPT AND RETURN
 See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-5423 VRW
DEFENDANT Lea Ann Chrones	DATE OF PROCESS AUG 7 2008 3:57
Order, Complaint, Summons	

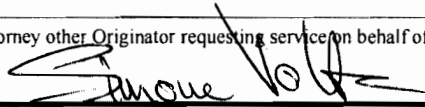
SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 M. Ruff CDCR-Correctional Officer
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 CDCR-Office of Correctional Safety 2880 Sunrise Blvd., Ste 130, Rancho Cordova, CA 95742 (attn. Everett Fischer)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-119 P.O.Box 7500 Crescent City, CA 95532	Number of process to be served with this Form 285 1	RECEIVED UNITED STATES MARSHAL NORTH DISTRICT OF CALIFORNIA 08 APR 16 PM 4:12
	Number of parties to be served in this case	
	Check for service on U.S.A.	

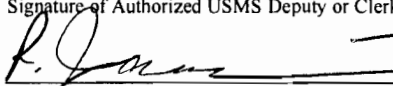
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, Full Telephone Numbers, and Estimated Times Available for Service):

Fold

Full name could be Michael Ruff

Signature of Attorney other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE 4/16/08
---	---	------------------	-----------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 27	Signature of Authorized USMS Deputy or Clerk 	Date 4/16/08
---	--------------------	------------------------------	-----------------------------	--	-----------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time <input type="checkbox"/> am <input type="checkbox"/> pm Signature of U.S. Marshal or Deputy

Service Fee \$8.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits 0	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
-----------------------	---	----------------	---------------	-----------------------	---

REMARKS: 5/1/08 - Mailed Summons w/285 Form
 5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
United States District Court
for the
Northern District of California

TO: M. Ruff, Correctional Officer
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

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If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) R. Jackson, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave.
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
[Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
 United States Marshals Service

PROCESS RECEIPT AND RETURN
 See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

08 AUG - 7 PM 3:51
 COURT CASE NUMBER

3:07-5423 VRW

DEFENDANT

Lea Ann Chrones et al.

TYPE OF PROCESS
 Order, Complaint, Summons

**SERVE
 AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

M. Ruff - CDCR - Correctional Officer

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

9838 Old Placeville Rd. , Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
 Pelican Bay State Prison C-10-119
 P.O. Box 7500
 Crescent City, CA 95532

Number of process to be
 served with this Form 285

Number of parties to be
 served in this case

Check for service
 on U.S.A.

RECEIVED
 UNITED STATES MARSHAL
 08 APR - 9 PM 3:21
 NORTHERN DISTRICT
 OF CALIFORNIA

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
 All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
 number of process indicated.
 (Sign only for USM 285 if more
 than one USM 285 is submitted)

Total Process

1

District of
 Origin

No. 11

District to
 Serve

No. 67

Signature of Authorized USMS Deputy or Clerk

[Signature]

Date

04/10/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described
 on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
 then residing in defendant's usual place
 of abode

Address (complete only different than shown above)

Date Time ☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

1800

Total Mileage Charges
 including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

0

Amount owed to U.S. Marshal* or
 (Amount of Refund*)

\$0.00

REMARKS:

5/1/08 - Mailed Summons w/ 285 Form - 129
 5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
 if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: M. Ruff, Correctional Officer
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones et al

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If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) R. Jackson, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
 United States Marshals Service

PROCESS RECEIPT AND RETURN
 See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-cv-05423-VRW
DEFENDANT Lea Ann Chrones et al.	TYPE OF PROCESS Order, Complaint, Summons

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 J. Garcilazo -LAC Correctional Officer
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 44750 60th St. W, Lancaster, CA 93536

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-119 P.O. Box 7500 Crescent City, CA 95532	Number of parties to be served in this case	
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

RECEIVED
 UNITED STATES MARSHAL
 08 APR 9 PM 3:18
 NORTHERN DISTRICT
 OF CALIFORNIA

Signature of Attorney other Originator requesting service on behalf of: <i>[Signature]</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE 4/7/08
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 10	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 4/14/08
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy	

Service Fee \$8.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: 3/1/08 Mailed Summons w/299 Form -- R. J.
 3/19/08 - Acknowledged Receipt

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
United States District Court
for the
Northern District of California

TO: J. Garcilazo - LAC Correctional Officer
California State Prison - LAC
44750 60TH Street, West
Lancaster, CA 93536

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

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If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha U.S. Marshal
Signature (USMS Official)
f. Rocha

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.

Attorney in Fact
Relationship to Entity/Authority to Receive

San Francisco, CA 94102
City, State and Zip Code

5/19/08
Service of Process

5/19/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

USM Form-299
Rev. 10/03
Automated 10/03

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

DEFENDANT

Lea Ann Chrones et al.

COURT CASE NUMBER

03-07-54237-VRW

TYPE OF PROCESS

Order, Complaint, Summons

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Richard Kirkland -PBSP - Former Acting Warden of PBSP

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.
(Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

1

District of Origin

No. 11

District to Serve

No. 37

Signature of Authorized USMS Deputy or Clerk

[Signature]

Date

04/10/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$8.00

Total Mileage Charges including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or (Amount of Refund*)

\$0.00

REMARKS:

5/1/08 - MAILED Summons w/ 285 Form R/S
5/19/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

DEFENDANT

Lea Ann Chrones et al.

COURT CASE NUMBER

3:07-5423 VRW 3: 53

TYPE OF PROCESS

Order, Complaint; Summons

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Richard Kirkland PBSP Former Acting Warden

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

Pelican Bay State Prison, P.O. Box 7000, Crescent City, CA 95531

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

RECEIVED
UNITED STATES MARSHAL
NORTHERN DISTRICT
OF CALIFORNIA
08 APR -9 PM 2:26

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney or other Originator requesting service on behalf of:

Simon Volk

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

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(Sign only for USM 285 if more than one USM 285 is submitted)

Total Process
1

District of Origin
No. 11

District to Serve
No. 11

Signature of Authorized USMS Deputy or Clerk

[Signature]

Date

04/07/08

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Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

98.00

Total Mileage Charges including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

[Signature]

Amount owed to U.S. Marshal* or (Amount of Refund*)

\$0.00

REMARKS:

5/1/08 - mailed w/299 Form - Rgn
5/19/08 - Acknowledged Receipt Rgn

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: Richard Kirkland
California Dept. of Corrections & Rehabilitation
Board of Parole Hearing⁴
P.O. Box 4036
Sacramento, CA 95812-4036

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones, et al

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I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) - R. James Smith

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455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.

San Francisco, CA 94102
City, State and Zip Code

Charles J. [Signature]
Signature

Attorney in fact
Relationship to Entity/Authority to Receive

5/19/08
Service of Process

5/19/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

UGM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-cv-05423-VRW
DEFENDANT Lea Ann Chrones et al.	TYPE OF PROCESS Order, Complaint, Summons

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Lea Ann Chrones - CDCR

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532

Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.

RECEIVED
UNITED STATES MARSHAL
NORTHERN DISTRICT
OF CALIFORNIA
08 APR -9 PM 3:17

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney or Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process
1

District of
Origin
No. 11

District to
Serve
No. 99

Signature of Authorized USMS Deputy or Clerk

Date

04/16/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee \$8.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
-----------------------	--	----------------	---------------	------------------	--

REMARKS:

4/6/08 - mailed summons w/ 299 Form - RJA

6/4/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: Lea Ann Chrones
California Dept. of Corrections & Rehabilitation
P.O. Box 4036
Sacramento, CA 95812-4036

Civil Action, File Number CV07-05423

Arcadio S. Acuna

v.

Lea An Chrones

RECEIVED
UNITED STATES
MARSHALS SERVICE
NORTHERN DISTRICT
OF CALIFORNIA
JUN 9 AM 11:15

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/6/08
Date of Signature

for Federico Rocio U.S. Marshal
Signature (USMS Official) Civil Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco CA 94102
City, State and Zip Code
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
6/4/08
Service of Process
6/4/08
Date of Signature

- Copy 1 - Clerk of Court
- Copy 2 - United States Marshals Service
- Copy 3 - Addressee
- Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

DEFENDANT

Lea Ann Chrones et al.

COURT CASE NUMBER

3:07-5423 VRW3: 57

TYPE OF PROCESS

Order, Complaint, Summons

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

J.S. Woodford - CDCR - Former Director

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

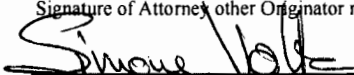
Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.RECEIVED
UNITED STATES MARSHAL
08 APR -9 PM 3:11
NORTHERN DISTRICT
OF CALIFORNIA

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney, other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 97

Signature of Authorized USMS Deputy or Clerk



Date

04/14/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

58.00

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS:

07/06/08. Mailed Summons w/299 form
5/19/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: J. S. Woodford
California Department of Corrections & Rehabilitation
P.O. Box 942883
Sacramento, CA 94283-0001

Civil Action, File Number CV07-05423

Arcadio S. Acuna

v.

Lea An Chrones

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/6/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) *F. J. Clark*

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

485 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
Chad A. [Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/19/08
Service of Process
5/19/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
 United States Marshals Service

PROCESS RECEIPT AND RETURN
 See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-5423-MRW
DEFENDANT Lea Ann Chrones et al.	TYPE OF PROCESS Order, Complaint, Summons

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 E. Alameida - CDCR - Former Director
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
 Pelican Bay State Prison C-10-119
 P.O. Box 7500
 Crescent City, CA 95532

Number of process to be served with this Form 285

1

Number of parties to be served in this case

Check for service on U.S.A.

RECEIVED
 UNITED STATES MARSHAL
 FOLD
 NORTHEN DISTRICT
 OF CALIFORNIA
 08 APR - 8 PM 3:18

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 99	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 07/16/08
---	--------------------	------------------------------	-----------------------------	--	------------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee \$8.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits \$	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
-----------------------	---	----------------	---------------	------------------------	---

REMARKS: 5/6/08 mailed summons w/299 Form
 5/19/08 Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: E. Alameida
California Department of Corrections & Rehabilitation
P.O. Box 942883
Sacramento, CA 94283-0001

Civil Action, File Number CV07-05423

Arcadio S. Acuna

v.

Lea An Chrones

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/6/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official)
R. J. Garcia, Clerk Civil

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
Charles F. [Signature]
Signature

Attorney in fact
Relationship to Entity/Authority to Receive
5/19/08
Service of Process
5/19/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
 United States Marshals Service

PROCESS RECEIPT AND RETURN
 See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF
 Arcadio S. Acuna

DEFENDANT
 Lea Ann Chrones et al.

COURT CASE NUMBER
 3:07-5423-VRW
 TYPE OF PROCESS
 Order, Complaint, Summons

**SERVE
 AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 N. Grannis - CDCR - Chief, Inmate Appeals Branch
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
 Pelican Bay State Prison C-10-119
 P.O. Box 7500
 Crescent City, CA 95532

Number of process to be served with this Form 285

1

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

RECEIVED
 UNITED STATES MARSHAL
 08 APR - 9 PM 3:28
 NORTHERN DISTRICT
 OF CALIFORNIA

Signature of Attorney, other Originator requesting service on behalf of:

Simone V. Holt

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE
 4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.
 (Sign only for USM 285 if more than one USM 285 is submitted)

Total Process
 1

District of Origin
 No. 11

District to Serve
 No. 97

Signature of Authorized USMS Deputy or Clerk

R. J. Foster

Date

4/14/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$81.00

Total Mileage Charges including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or (Amount of Refund*)

\$0.00

REMARKS

5/1/08 - mailed summons w/ 299 form
 5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
United States District Court
for the
Northern District of California

TO: N. Grannis
California Department of Corrections & Rehabilitation
Inmate Appeals Branch
P.O. Box 942883
Sacramento, CA 94283-0001

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chones

RECEIVED
UNITED STATES MARSHAL
NORTHERN DISTRICT
OF CALIFORNIA
08 MAY 19 AM 11:12

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Racho, U.S. Marshal
Signature (USMS Official)

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
Charles [Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
 United States Marshals Service

PROCESS RECEIPT AND RETURN
 See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-5423 YRW
DEFENDANT Lea Ann Chrones et al.	TYPE OF PROCESS Order, Complaint, Summons

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 N. Grannis - CDCR- Chief, Inmate Appeals Branch
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 CDCR- Inmate Appeals Branch attn.:Lori Zamora - Lit. Coordinator, P.O. Box 942883, Sacramento, CA 94283-0001

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Arcadio S. Acuna ID # C-43165 Pelican Bay State Prison C-10-119 P.O.Box 7500 Crescent City, CA 95532	Number of process to be served with this Form 285 1
	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney other Originator requesting service on behalf of: <i>Simon Valle</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER
---	---	------------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 97	Signature of Authorized USMS Deputy or Clerk <i>R. J. [Signature]</i>	Date 4/16/08
---	--------------------	------------------------------	-----------------------------	--	-----------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy

Service Fee \$8.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits 0	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
-----------------------	---	----------------	---------------	-----------------------	---

REMARKS: 5/1/08 - mailed summons w/299 Form
 5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: N. Grannis
California Department of Corrections & Rehabilitation
Inmate Appeals Branch
P.O. Box 942883
Sacramento, CA 94283-0001

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) R. Jenkins, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
[Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense